

## CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

1014105

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
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48						
49						
50						
Total Indep.	5					
Total Depend		11	11	11	11	11
Total Claims	10					

May be used for additional claims or amendments

51						
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100						
Total Indep.						
Total Depend						
Total Claims						